

09/534204

### CLAIMS AS FILED - PART I

|                                   | (Column 1) | (Column 2)               |
|-----------------------------------|------------|--------------------------|
| TOTAL CLAIMS                      |            |                          |
| FOR                               | FRAM RITE  | NUMBER 217A              |
| TOTAL CHARGEABLE CLAIMS           | NUMBER 20  |                          |
| INDEPENDENT CLAIMS                | NUMBER 3   |                          |
| MULTIPLE DEPENDENT CLAIMS PRESENT |            | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2.

9-22-03

### CLAIMS AS AMENDED - PART II

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 13                               | Minus                              | 58                       |
| Independent                                    | 5                                | Minus                              | 13                       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 370.00 |
| X\$9=     |        |
| X42=      |        |
| +140=     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 740.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     |        |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| X\$9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X84=   |                |
| +280=  |                |
| TOTAL  |                |

RCE filed

(Column 1) 12/18/03

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|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 10                               | Minus                              | 58                       |
| Independent                                    | 3                                | Minus                              | 13                       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| X\$9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X84=   |                |
| +280=  |                |
| TOTAL  |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 13                               | Minus                              | 58                       |
| Independent                                    | 3                                | Minus                              | 13                       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| X\$9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X84=   |                |
| +280=  |                |
| TOTAL  |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.